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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/863,929
Filing Date	05/23/2001
First Named Inventor	Lee et al.
Group Art Unit	RECEIVED
Examiner Name	MAR 05 2003
Total Number of Pages in This Submission	4
Attorney Docket Number	Technology Center 2600

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John V. Biernacki	RECEIVED
Signature		MAR 12 2003
Date	Feb. 25, 2003	DIRECTOR'S OFFICE TECHNOLOGY CENTER 2600

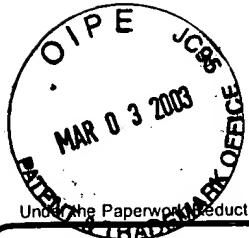
### CERTIFICATE OF MAILING

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Typed or printed name	Kathie J. Kopczyk		
Signature	Kathie J. Kopczyk	Date	February 25, 2003

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PTO/SB/83 (03-02)

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT**

Application Number	09/863,929
Filing Date	May 23, 2001
First Named Inventor	Lee et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	

**RECEIVED**To: Assistant Commissioner for Patents  
Washington, DC 20231

MAR 05 2003

I hereby apply to withdraw as attorney or agent for the above identified patent application.

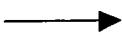
Technology Center 2800

The reasons for this request are:

The client has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time.

The undersigned attorney of record has previously notified the applicant of this request, and will do so again by copy of this form.

1.  The correspondence address is NOT affected by this withdrawal.
2.  Change the correspondence address and direct all future correspondence to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Brian T. McGee, C.A.			
Address	Zeifman & Company, LLP			
Address	Chartered Accountants, 201 Bridgeland Avenue			
City	Toronto	State	ZIP	M6A 1Y7
Country	Canada			
Telephone	<input type="text"/> Fax <input type="text"/>			

 This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number \_\_\_\_\_

This request is enclosed in triplicate (including any attachments).

**RECEIVED**

Name	John V. Biernacki	MAR 19 2003
Signature		DIRECTOR'S OFFICE
Date	Feb. 25, 2003	TECHNOLOGY CENTER 2800

NOTE: Withdrawal is effective when approved rather than when received.

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.